

# TRAVEL IMPRESSIONS

## GROUP DEPARTMENT

465 Smith St., Farmingdale, N.Y. 11735

Booking # \_\_\_\_\_

I hereby authorize Travel Impressions to charge the amount of \_\_\_\_\_  
(Specify amount)

to my \_\_\_\_\_ Account number \_\_\_\_\_  
(cc. name - ex. Visa)

Expiration date \_\_\_\_\_ . Security Code \_\_\_\_\_

Print name as it appears on credit card: \_\_\_\_\_

*By signing below, I acknowledge that I understand I may not be entitled to a full refund should my travel plans change and any cancellation or change fees apply:*

Signature of cardholder \_\_\_\_\_

Date of signature \_\_\_\_\_

Billing address of cardholder \_\_\_\_\_

(Zip code required) \_\_\_\_\_

Phone number of cardholder \_\_\_\_\_

Above Credit card to be used for the following specific group travel:

Travel Agency name      MACNAIR TRAVEL AMERICAN EXPRESS

Group name                      TEAM Z IRONMAN COZUMEL

Group Travel dates      NOV 22-NOV 29 or NOV 24- NOV 28

Travel Impressions' Sales Coordinator: SHERRY HODKINSON

***Passengers MUST return this form directly to their Travel Agent.***  
PLEASE FAX THIS FORM TO 703-836-2078. Include a legible copy of the front and back of your credit card.

**Thank you for using MacNair Travel & Travel Impressions!**